

Arizona Department of Health Services
Office for Children with Special Health Care Needs

REPORT OF RECORDS DESTRUCTION

DATE: _____

CONTRACTOR NAME: _____ PHONE: _____

ADDRESS: _____

LIST OF RECORDS DESTROYED

RECORD NAME/ DOB / PROGRM	DATES COVERED		*ESTIMATED VOLUME
	FROM	THRU	

The above records have been destroyed so as to render them totally useless.

DESTROYED BY (NAME): _____

TITLE: _____

SIGNATURE: _____ DATE: _____

****Volume of paper records is estimated in cubic feet to the nearest whole number. Volume of digital records may be stated by the estimated memory volume it.***

Estimate the volume, in cubic feet, of records destroyed:

One letter size file drawer = 1.5 cu. ft.

One legal size file drawer = 2.0 cu. ft.